

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Lene

2. Surname (Last Name)

Jarlbæk

3. Date

28-March-2016

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Håndtering af obstipation hos voksne, palliative patienter

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. Jarlbæk has nothing to disclose.

Evaluation and Feedback

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ICMJJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Berit	2. Surname (Last Name) Johnsen	3. Date 12-April-2016
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Lene Jarlbæk
5. Manuscript Title Håndtering af obstipation hos voksne, palliative patienter		
6. Manuscript Identifying Number (if you know it) UFL-03-16-0218		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Johnsen has nothing to disclose.

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1. Given Name (First Name)

Ole Bo

2. Surname (Last Name)

Hansen

3. Date

08-April-2016

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Lene Jarlbæk

5. Manuscript Title

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6. Manuscript Identifying Number (if you know it)

UFL-03-16-0218

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1. Given Name (First Name) *BIRTE SAXTOFT* 2. Surname (Last Name) *HEDAL* 3. Date *13. 04. 16*
4. Are you the corresponding author? Yes No Corresponding Author's Name
Lene Jarlbæk
5. Manuscript Title
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